



CCG® - SYSTEM

Cerclage and Stabilisation System

The cerclage and stabilisation system was developed by Dr. Ferdinand Gundolf in the year 1993 in Kufstein (Tyrol). Since its introduction, the CCG® system has impressively established itself internationally in a broad range of indications. In addition to traumatology indications, it has proved itself especially in the area of hip revision surgery as a protection from fissures when rasping the new implant bed, and as cortex reinforcement.

The CCG® system consists of titanium bands with a broad contact surface so that the bones are not cut into and the circulation is not cut off.

Titanium stabilisers offer support for the bone not only primarily, but also in the long term due to rapid osseointegration.

The clinical successes in the last 20 years confirm the concept and have made the Gundolf cerclage and stabilisation system one of the leading cerclage systems.



CCG® BAND

The CCG® system consists of the CCG® band and the CCG® - GF band (band with joint and fixation spikes). Both tapes are made of pure titanium. The CCG® - GF band was developed primarily for use on tapered bone, for the proximal and distal end of the femur.

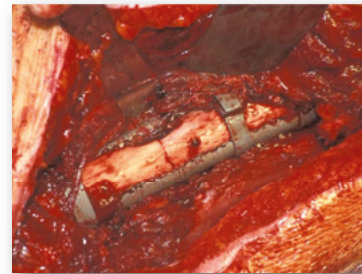
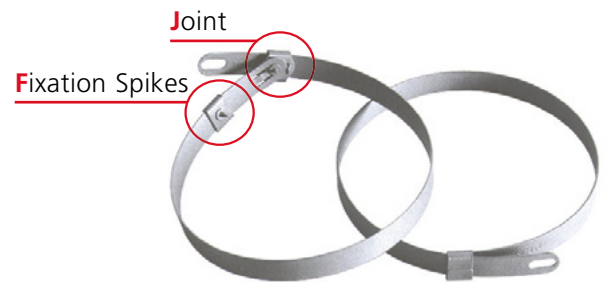
Large Bone Contact Surface

The broad contact surface eliminates the disadvantages of cerclage wires. The CCG® band allows for specific compression and therefore does not cut into the bone.

Infinitely variable adjustment makes the cerclage of long bones of various diameters possible.

CCG® Band with Joint and Fixation Spikes

The joint allows for taper adaptation so that the band can also be applied to tapered bones with lowest surface pressure. The mobile joint with fixation spikes prevents the band from slipping and secures bone parts in the desired position.



CCG® STABILISER

The CCG® stabiliser consists of a vaulted pure titanium element that forms a stable connection with the bone when wrapped with CCG® compression cerclages. Fixation of the CCG® stabiliser to the bone without range of motion is achieved by the serrated edges that penetrate the bone to a controlled depth.



In addition to intramedullary splinting by the endoprosthesis, the combined CCG® system also provides an effective external splint for the cortex. The combined CCG® system thus becomes a functional component of the weakened cortex. In contrast to plates fixed with screws, there is no conflict of fixation with indwelling prosthetic stems.

LITERATURE

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